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What's In A Name? Measuring Potential Influence of Medical Cannabis Labels on Attitudes Towards Its Use

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WHAT'S IN A NAME? CANNABIS LABELING EFFECTS

<https://osf.io/dzwvn/>

DYLAN PIEPER

Which sounds more acceptable?
Marijuana or **nabiximols**?

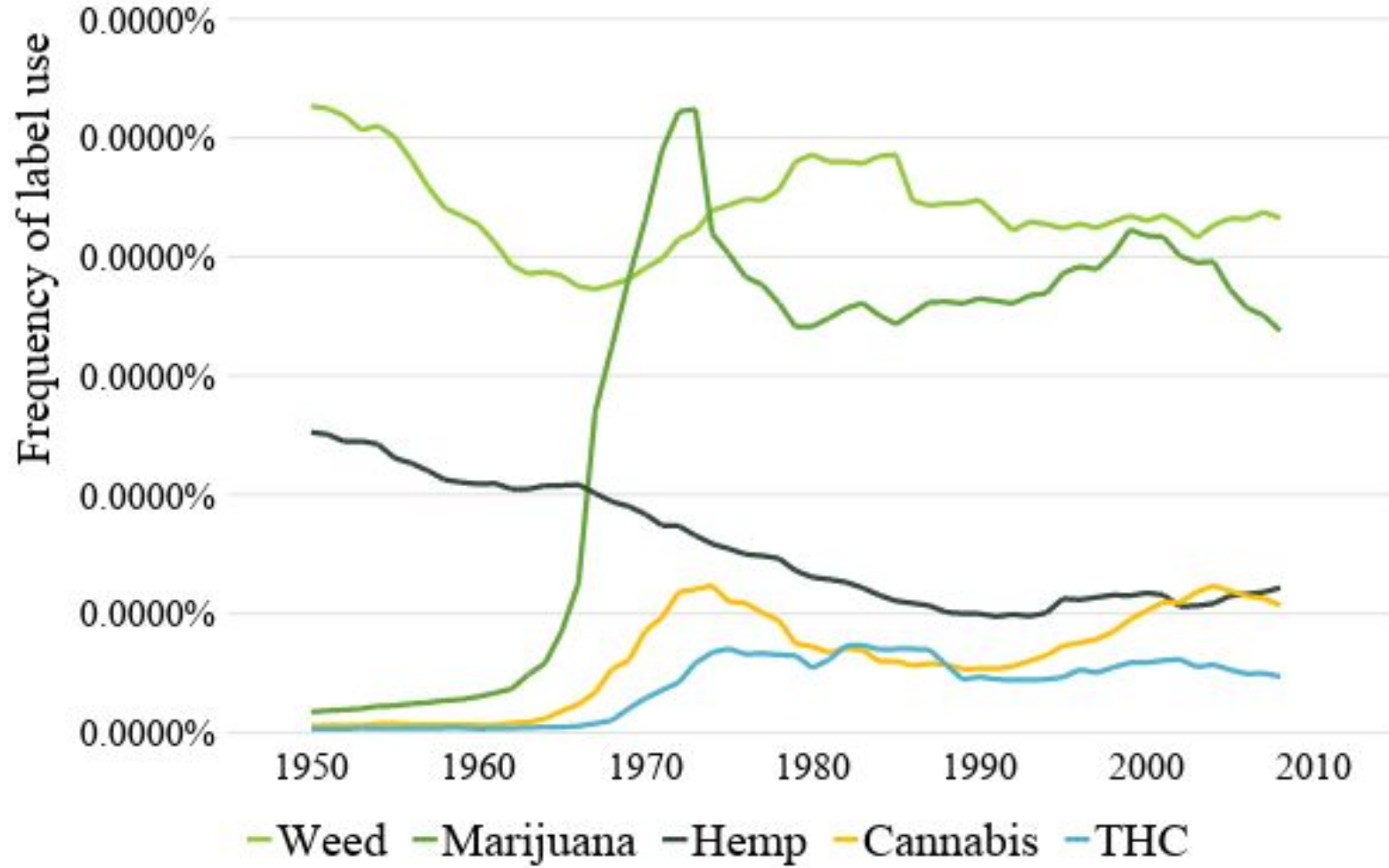


(Royalty free via Unsplash)

STIGMA, LABELS, & SOCIAL VALIDITY

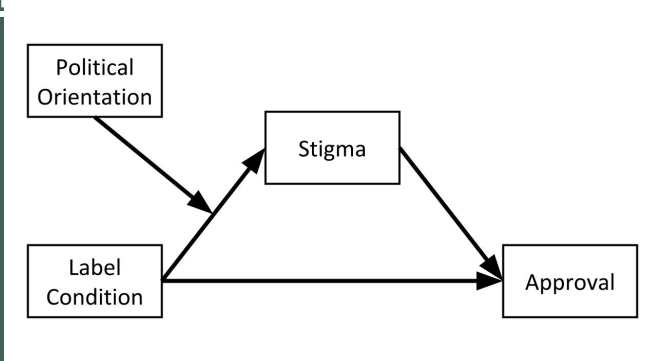
- Stigma is conveyed via labels (Link & Phelan, 2001)
 - Survivors vs. victims (Papendick & Bohner, 2015)
 - Noncitizens vs. illegal aliens (Rucker, Murphy, & Quintanilla, 2019)
 - Marijuana cigarette vs. pill (Rudski, 2014)
- How do stigmatizing labels such as marijuana shape people's attitudes toward its medical efficacy? (Wolf, 1978)

Google Ngram of Labels for Cannabis (1950-2008)



Variables & Hypotheses

- Labels: **Marijuana, cannabis, THC, and nabiximols**
- Context: Treating pain due to cancer (from JAMA, 2015)
- Seeing marijuana (vs. nabiximols) will decrease approval, increase preference for prohibitive policy, increase stigma, and increase moral conviction for views.



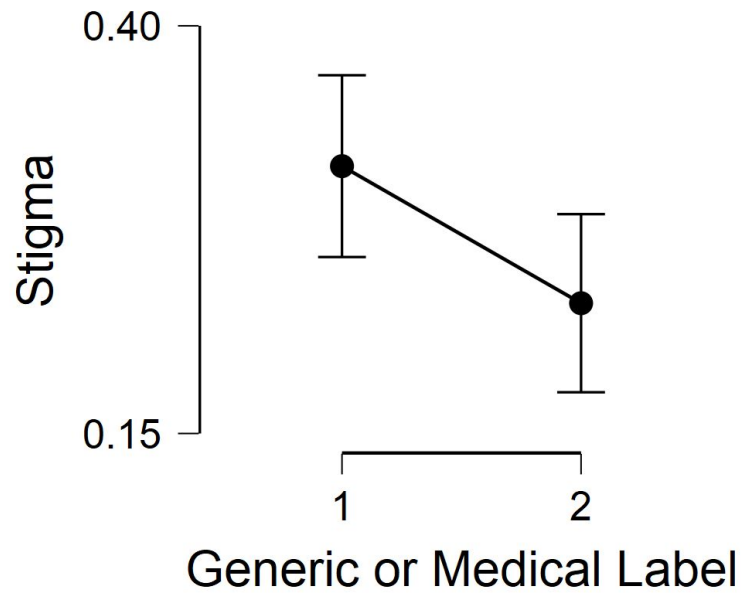
- MTurk ($n = 138$; U.S. only; \$1.00 payment)

Measures

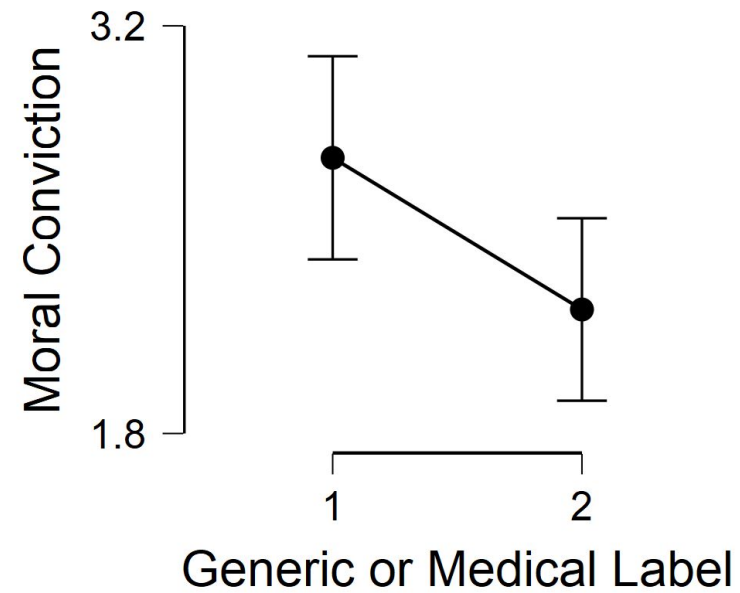
- Treatment approval (eight-item; $\alpha = .9$)
This treatment is an acceptable treatment for cancer pain.
- Stigma (four-items; $\alpha = .8$)
I would be ashamed to use marijuana to treat my cancer pain.
- Policy preference for medical cannabis (three-items; $\alpha = .8$)
Marijuana should be legal OTC, prescribed, and for research.
- Moral conviction (one-item) extent feelings on marijuana reflect beliefs about fundamental right and wrong
- Political orientation (one-item; 1 = *very lib.* to 5 = *very con.*)

Pearson Correlation Matrix

		Moral Conviction	Stigma	Approval	Policy Preference
Moral Conviction	Pearson's r	—			
	p-value	—			
Stigma	Pearson's r	0.294	—		
	p-value	< .001	—		
Approval	Pearson's r	-0.029	-0.563	—	
	p-value	0.736	< .001	—	
Policy Preference	Pearson's r	-0.071	-0.562	0.767	—
	p-value	0.408	< .001	< .001	—

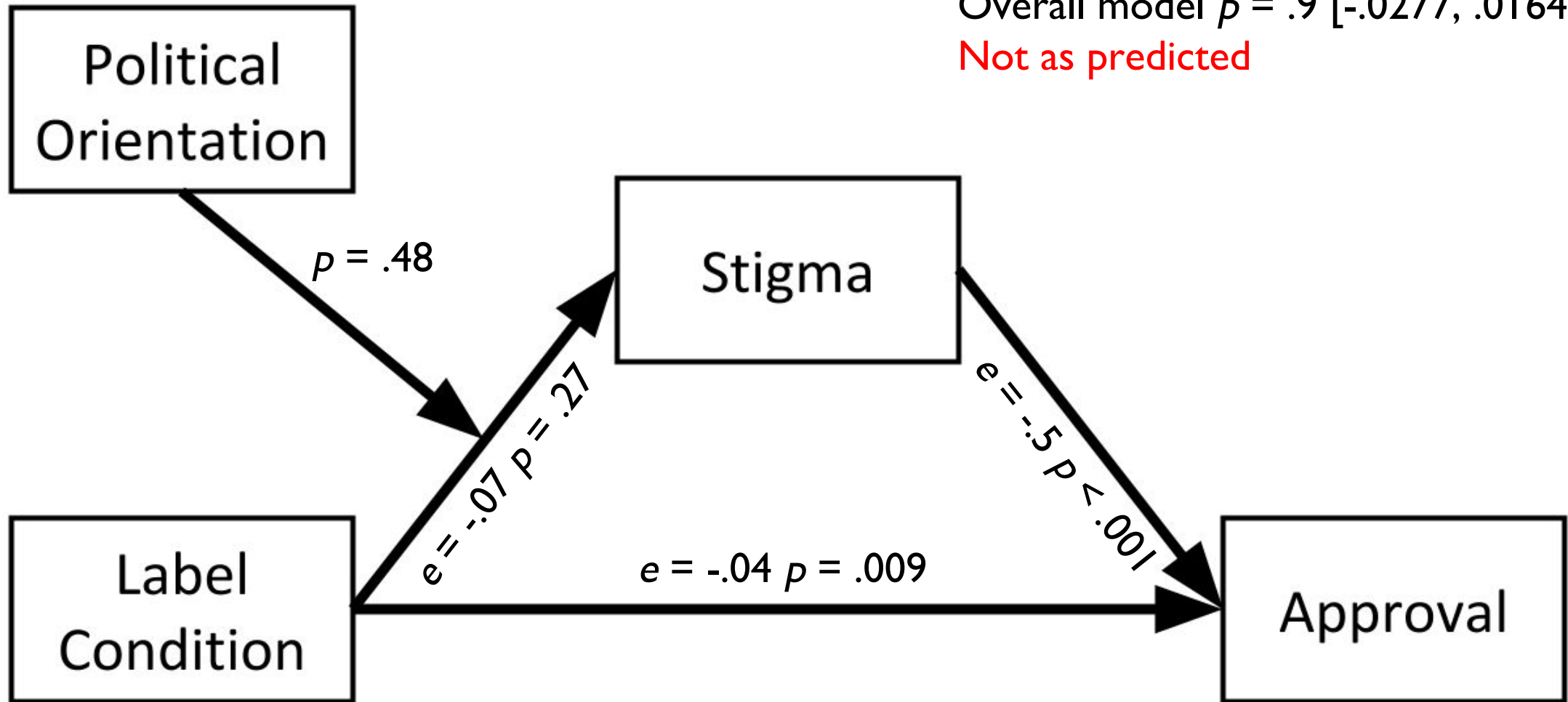


$d = .39$ $p = .03$



$d = .37$ $p = .04$

Marijuana vs. Nabiximols ($n = 63$)
Overall model $p = .9$ $[-.0277, .0164]$
Not as predicted



Discussion

- General vs. medical lang. implications for treatment acceptability
 - Should we evoke stigma? Under what conditions would it go away?
- Need more power (direct replication w/ at least 2x participants) to look at users and non-users accurately
- Examine other samples
 - MTurk seems to have high acceptance for marijuana
 - Less-accepting populations should be examined (i.e., physicians)